

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
**TRANSCRIPT ORDER FORM**

111 First Street  
Bay City, MI 48708

211 W. Fort Street  
17th Floor  
Detroit, MI 48226

226 W. Second Street  
Flint, MI 48502

**Order Party: Name, Address and Telephone Number**

Name Robert D. Gordon

Firm Clark Hill PLC

Address 151 S. Old Woodward Avenue, Suite 200

City, State, Zip Birmingham, Michigan 48009

Phone 248-988-5882

Email rgordon@clarkhill.com

**Case/Debtor Name:** City of Detroit, Michigan

**Case Number:** 13-53846

**Chapter:** 9

**Hearing Judge** Hon. Steven Rhodes

☒ Bankruptcy ☐ Adversary

☐ Appeal Appeal No: \_\_\_\_\_

**Hearing Information** (A separate form must be completed for **each** hearing date requested.)

**Date of Hearing:** 08/28/2013 **Time of Hearing:** 10 a.m. **Title of Hearing:** Motion/Protective Order, et al.

Please specify portion of hearing requested: ☒ Original/Unredacted ☐ Redacted ☐ Copy (2<sup>nd</sup> Party)

☒ Entire Hearing ☐ Ruling/Opinion of Judge ☐ Testimony of Witness ☐ Other

Special Instructions: \_\_\_\_\_

**Type of Request:**

- ☐ Ordinary Transcript - \$3.65 per page (30 calendar days)  
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Transcript To Be Prepared By

\_\_\_\_\_  
Date By

Order Received:

Transcript Ordered

Transcript Received

**Signature of Ordering Party:**

/s/ Robert D. Gordon Date: 8/28/13

By signing, I certify that I will pay all charges upon completion of the transcript request.